

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: 4/6/04 2 Serial/Patent # 09/431,737

3 Please refund the following fee(s):	4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing			\$
Amendment			\$
Extension of Time			\$
Notice of Appeal/Appeal			\$
X Petition	15	02/24/04	\$ 130
Issue			\$
Cert of Correction/Terminal Disc.			\$
Maintenance			\$
Assignment			\$
Other			\$
		7 TOTAL AMOUNT OF REFUND	\$ 130
8 TO BE REFUNDED BY:			
10 REASON:		Treasury Check	
X Overpayment		X	Credit Deposit A/C #:
Duplicate Payment		9	06 -- 1130
No Fee Due (Explanation):			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>E. Shirene Willis</u>		TITLE: <u>Pat. Atty</u>	
SIGNATURE: <u>E. Shirene Willis</u>		PHONE: <u>308-6712</u>	
OFFICE: <u>Office of Petitions</u>			
***** THIS SPACE RESERVED FOR FINANCE USE ONLY *****			
APPROVED: <u>Alicia Kell</u>		DATE: <u>4-6-04</u>	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B